

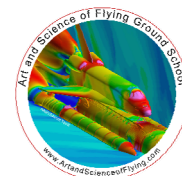
Aviation Career Exploration ACADEMY

June 12-15, 2017



For Idaho
Students
Grades 9-12
Ages 14-18

Hosted By:



With support
from:



IDAHO
STEM
ACTION CENTER



Idaho Ninety-Nines



Calling All TEACHERS

Be part of our aviation-themed Living Lab on
Wednesday, June 14th

Participate as a learner alongside our ACE
Academy students in a fun, hands-on lab.

Complete the application form and return by the
deadline. For information on scholarship and in-
service credit opportunities, please contact
rich@richstowell.com

For details on lab content as it develops, see:
www.aceacademyboise.weebly.com

Experience STEM through the lens of Aviation!



What is the "ACE" ACADEMY?

Hosted by the Idaho Division of Aeronautics, the Aviation Career Exploration ("ACE") Academy is a program designed to introduce high school students to aviation and space-related careers.

As a student-participant in the ACE program, your activities will involve field trips to places like the airport terminal, a flight school, a military aviation facility, and an air traffic control tower. Other activities include seminars on aviation careers and colleges and a flight in the local area.

Enrollment is limited. Tuition is \$60 per student for four days, which includes some meals, tours, and field trip transportation. **The fee, however, is not due until you have been notified of your selection.** Limited scholarship assistance is available for students unable to meet the tuition requirements.

Some host families may be available for interested students who do not live in the Boise vicinity and who need lodging during the Academy. Further, accommodations may be made for those with special needs with advanced notice.

NEW in 2017 — Teachers Invited! Participate as a learner alongside our ACE Academy students in a hands-on lab on Wednesday, June 14th. Complete the application form and return by the deadline. Cost: \$50. Ask about scholarship and equivalent in-service credit opportunities. Experience STEM through the lens of aviation!

The Academy home base will be the office of the Idaho Division of Aeronautics at 3483 Rickenbacker St., Boise. For more information, please contact us Monday through Friday between 8 a.m. and 5 p.m. at:

**Idaho Division of Aeronautics
3483 Rickenbacker St.
Boise, ID 83705**

**Office: 208-334-8775
Email: tammy.schoen@itd.idaho.gov
Website: www.itd.idaho.gov/aero**

Application must be postmarked by **May 1, 2017**. No late applications will be accepted.

Some comments from past ACE students:

- *"The ACE Academy has been a very rewarding experience. It has succeeded in expanding my knowledge of aviation."*
- *"I had no idea, until ACE, that there were so many careers in Aviation."*
- *"The ACE Academy was a thrill and the most fun of the summer."*

COME JOIN THE FUN!

APPLICATION FOR ACE ACADEMY

JUNE 12-15, 2017

I am a: ☐ Student ☐ Teacher

Name: _____

Preferred name for nametag: _____

Address: _____

Best email: _____

City: _____ State: _____

Best phone number: _____

Zip: _____

Name of school: _____

Grade you will be attending/teaching next year: _____

Students please complete this section

Parent/guardian: _____

Parent/guardian: _____

Contact Phone #: _____

Contact Phone #: _____

Work Phone #: _____

Work Phone #: _____

Email: _____

Email: _____

Emergency Contact: _____

Emergency Phone #: _____

Have you ever flown in a small aircraft? ☐ Yes ☐ No

Gender: M / F

T-Shirt Size _____

Birthdate: _____

In June, my age will be: _____ years old

Will you need a host family? ☐ Yes ☐ No

Would your family be willing to host a student? ☐ Yes ☐ No

Remarks: _____

Tuition: Students - \$60

Teacher - \$50

Payment due upon notification of selection to attend.

Please complete the application and return no later than **MAY 1, 2017**.

STUDENTS ONLY:

- ☐ One-page essay: Why do you want to attend the ACE Academy? Please describe your aviation, science or other educational goals.
- ☐ One-page Letter of Recommendation from a teacher, who is not a family member.
- ☐ One-page Letter of Recommendation from someone other than a teacher or family member.

— APPLICATION CONTINUED ON BACK —

THE FOLLOWING MUST BE COMPLETED TO BE CONSIDERED FOR THE ACE ACADEMY

RELEASE AND INDEMNITY AGREEMENT

The undersigned parents or guardians and participants agree as follows:

- a) Permission for my teenage child to attend and participate in all ACE Academy activities, without restriction, is hereby granted. **I understand my child will receive an aircraft and/or balloon ride from a volunteer pilot who is not in the employment of the Division of Aeronautics.**
- b) It is agreed, on behalf of me and my personal representative, assigns, heirs and next of kin to discharge and not sue the Idaho Division of Aeronautics, Federal Aviation Administration and its divisions, and any of their officers, directors, agents, employees, paid or volunteer workers or co-sponsors of the activity ("released parties") for any loss or damage which may result from injury or death to any participant or property damage, including any loss, damage or costs resulting directly or indirectly from the released parties' negligence, while the participant is involved in the ACE Academy.
- c) We agree to indemnify and hold harmless each of the released parties for any loss, damage, or costs they may incur, and for any liability that they may have to any other party, as a result of the participant's activities in the ACE Academy, including any loss, damage or costs resulting directly or indirectly from the released parties' negligence.

PERMISSION FOR MEDICAL TREATMENT

I believe I am/my child is physically and mentally capable of participating in all aspects of the ACE Academy. It is my duty to consult a physician to get approval if I/ my child had or now has an injury or illness that would limit or prohibit such activities. I hereby grant permission to take me/my child to any appropriate medical facility for emergency treatment.

Allergies/Medical Conditions: _____

CONSENT FOR PROMOTION

I/we hereby grant permission to photograph and/or interview participant for promotional purposes.

The undersigned hereby agree to follow the rules of conduct established for the ACE Academy. We have read this entire document and fully understand each term and condition set forth above.

Signature of participant: _____

Date: _____

Signature of parent/guardian: _____

Date: _____

Signature of parent/guardian: _____

Date: _____

Is applicant covered by health insurance? ☐ Yes ☐ No

Name of insurance company: _____

Policy #: _____

Group #: _____

Remarks: _____

Return completed application and required documents to:

**IDAHO DIVISION OF AERONAUTICS
3483 RICKENBACKER ST.
BOISE, ID 83705**

Or email to:

tammy.schoen@itd.idaho.gov